

*Medicare Prescription Drug, Improvement, and Modernization Act of 2003*  
**IMPROVEMENTS FOR BENEFICIARIES WITH DIABETES**  
*Sections 101, 417, 611, 613, 721, and 733*

The Medicare program already covers many services for beneficiaries with diabetes. The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) adds to that coverage with the following improvements for beneficiaries with diabetes:

- Medicare Part D drug benefit: The MMA will cover insulin and associated diabetic supplies (including syringes), beginning in 2006.
- Diabetes Screening Tests: The MMA establishes new coverage of diabetes screening tests for persons at risk for diabetes, including a fasting plasma glucose test and such other tests as the Secretary may determine appropriate. Eligible risk factors include hypertension, dyslipidemia, obesity, prior identification of impaired fasting glucose or glucose tolerance, or at least two of the following: overweight, family history of diabetes, history of gestational diabetes or delivery of a baby over 9 pounds, and age of 65 or older. Like other Medicare lab tests, this will be free to beneficiaries. This new benefit begins in 2005.
- Welcome-to-Medicare Physical Exam: The MMA establishes coverage of a one-time preventive physical exam within 6 months of a beneficiary's enrollment under Medicare Part B. Among other services, this new benefit will enable beneficiaries with diabetes to learn about the diabetes benefits already covered by Medicare (including diabetes self-management training, blood glucose monitoring supplies, diabetic shoes, and other services). It will also provide an opportunity to assess risk factors that could lead to complications of diabetes and to identify any existing co-morbidities. This new benefit begins in 2005.
- Medication Therapy Management: The new prescription drug program (beginning in 2006) will include drug therapy management for beneficiaries with multiple chronic diseases (including diabetes) who take multiple drugs and spend more than a specified amount annually on drugs covered under the prescription drug benefit. These drug management programs will help ensure the best therapeutic outcomes and reduce the risk of adverse medication events.
- Fee-for-Service Voluntary Chronic Care Improvement: Building upon Medicare's existing disease management demonstrations, the MMA will phase in coverage of fee-for-service chronic care improvement programs. These programs are designed to improve clinical outcomes and beneficiary satisfaction, and to help control costs for beneficiaries with a variety of chronic conditions (including diabetes). They may be carried out by disease management organizations, health insurers, integrated delivery systems, physician group practices, a consortium of such entities, or any other entity the Secretary determines to be appropriate.

- Pancreatic Islet Cell Transplant Clinical Trials: The MMA requires the National Institute of Diabetes and Digestive and Kidney Disorders to conduct clinical trials of pancreatic islet cell transplantation including Medicare beneficiaries. Medicare will cover the routine costs of such trials (including immunosuppressive drugs) as well as the transplantation and related items and services.
- Telemedicine Demonstration: The MMA extends for 4 more years a telemedicine demonstration established by the BBA to improve primary care and prevent health complications in beneficiaries with diabetes.